

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

ALAMEDA COUNTY TREASURER

1221 OAK STREET

OAKLAND CA

94612

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.03911790

Gross Claim	\$	979,313.95
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	979,313.95
YTD Amount:	\$	7,863,778.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
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ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00010613

Gross Claim	\$	2,656.96
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,656.96
YTD Amount:	\$	21,333.53

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
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AMADOR COUNTY TREASURER

810 COURT STREET

JACKSON CA

95642

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00132860

Gross Claim	\$	33,261.41
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	33,261.41
YTD Amount:	\$	267,084.31

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00893807

Gross Claim	\$	223,763.97
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	223,763.97
YTD Amount:	\$	1,796,798.66

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CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00136296

Gross Claim	\$	34,121.61
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	34,121.61
YTD Amount:	\$	273,993.80

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COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00106888

Gross Claim	\$	26,759.34
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	26,759.34
YTD Amount:	\$	214,873.16

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CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ CA 94553

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.02011996

Gross Claim	\$	503,701.82
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	503,701.82
YTD Amount:	\$	4,044,667.04

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DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00127153

Gross Claim	\$	31,832.67
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	31,832.67
YTD Amount:	\$	255,614.08

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EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA 95667

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00494732

Gross Claim	\$	123,855.82
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	123,855.82
YTD Amount:	\$	994,547.81

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FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.02544471

Gross Claim	\$	637,006.58
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	637,006.58
YTD Amount:	\$	5,115,087.18

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GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00122313

Gross Claim	\$	30,620.98
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	30,620.98
YTD Amount:	\$	245,882.88

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HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00862799

Gross Claim	\$	216,001.14
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	216,001.14
YTD Amount:	\$	1,703,967.97

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IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA 92243 2863

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00880355

Gross Claim	\$	220,396.27
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	220,396.27
YTD Amount:	\$	1,769,757.96

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INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA 93526

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00165903

Gross Claim	\$	41,533.70
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	41,533.70
YTD Amount:	\$	333,511.17

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KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01721219

Gross Claim	\$	430,906.00
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	430,906.00
YTD Amount:	\$	3,460,125.99

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KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00445853

Gross Claim	\$	111,618.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	111,618.99
YTD Amount:	\$	896,286.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

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CLAIM SCHEDULE NUMBER: 1100293A
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LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00199461

Gross Claim	\$	49,934.93
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	49,934.93
YTD Amount:	\$	400,970.11

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LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00134019

Gross Claim	\$	33,551.57
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	33,551.57
YTD Amount:	\$	269,415.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.31055683

Gross Claim	\$	7,774,769.05
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	7,774,769.05
YTD Amount:	\$	62,430,490.74

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
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MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00444444

Gross Claim	\$	111,266.25
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	111,266.25
YTD Amount:	\$	893,455.06

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00978122

Gross Claim	\$	244,872.17
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	244,872.17
YTD Amount:	\$	1,961,571.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA 95338

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00071281

Gross Claim	\$	17,845.15
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	17,845.15
YTD Amount:	\$	143,294.48

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00285164

Gross Claim	\$	71,390.61
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	71,390.61
YTD Amount:	\$	573,258.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

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MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00629714

Gross Claim	\$	157,648.47
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	157,648.47
YTD Amount:	\$	1,265,898.87

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA

96101

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00079121

Gross Claim	\$	19,807.89
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	19,807.89
YTD Amount:	\$	159,054.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA 93517

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00114140

Gross Claim	\$	28,574.87
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	28,574.87
YTD Amount:	\$	229,451.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00812080

Gross Claim	\$	203,303.67
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	203,303.67
YTD Amount:	\$	1,632,503.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

NAPA COUNTY TREASURER
1195 THIRD STREET ROOM 108

NAPA CA 94559 3035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00419176

Gross Claim	\$	104,940.43
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	104,940.43
YTD Amount:	\$	842,660.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA 95959

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00269975

Gross Claim	\$	67,588.06
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	67,588.06
YTD Amount:	\$	542,724.24

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.06443975

Gross Claim	\$	1,613,244.74
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,613,244.74
YTD Amount:	\$	12,954,167.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00380642

Gross Claim	\$	95,293.46
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	95,293.46
YTD Amount:	\$	765,196.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00113416

Gross Claim	\$	28,393.62
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	28,393.62
YTD Amount:	\$	222,499.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.03289206

Gross Claim	\$	823,450.48
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	823,450.48
YTD Amount:	\$	6,612,212.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.03445505

Gross Claim	\$	862,579.82
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	862,579.82
YTD Amount:	\$	6,926,413.88

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA

95023

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00159150

Gross Claim	\$	39,843.09
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	39,843.09
YTD Amount:	\$	319,936.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.03996868

Gross Claim	\$	1,000,613.17
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,000,613.17
YTD Amount:	\$	8,034,807.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.07799922

Gross Claim	\$	1,952,705.15
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,952,705.15
YTD Amount:	\$	15,679,995.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.05924515

Gross Claim	\$	1,483,198.28
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,483,198.28
YTD Amount:	\$	11,909,911.43

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01529154

Gross Claim	\$	382,822.66
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	382,822.66
YTD Amount:	\$	3,074,021.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00459188

Gross Claim	\$	114,957.40
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	114,957.40
YTD Amount:	\$	923,095.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01397274

Gross Claim	\$	349,806.59
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	349,806.59
YTD Amount:	\$	2,808,906.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00838718

Gross Claim	\$	209,972.48
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	209,972.48
YTD Amount:	\$	1,686,054.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.03392573

Gross Claim	\$	849,328.33
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	849,328.33
YTD Amount:	\$	6,820,007.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00556855

Gross Claim	\$	139,408.27
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	139,408.27
YTD Amount:	\$	1,119,431.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00771514

Gross Claim	\$	193,148.00
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	193,148.00
YTD Amount:	\$	1,550,957.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00026775

Gross Claim	\$	6,703.10
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	6,703.10
YTD Amount:	\$	53,826.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00208334

Gross Claim	\$	52,156.27
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	52,156.27
YTD Amount:	\$	418,808.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01114865

Gross Claim	\$	279,105.69
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	279,105.69
YTD Amount:	\$	2,241,185.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01734410

Gross Claim	\$	434,208.36
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	434,208.36
YTD Amount:	\$	3,476,548.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01168672

Gross Claim	\$	292,576.24
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	292,576.24
YTD Amount:	\$	2,349,353.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA 95992

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00403600

Gross Claim	\$	101,040.98
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	101,040.98
YTD Amount:	\$	811,347.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA 96080

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00274331

Gross Claim	\$	68,678.58
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	68,678.58
YTD Amount:	\$	551,481.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

TRINITY COUNTY TREASURER
PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00117460

Gross Claim	\$	29,406.03
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	29,406.03
YTD Amount:	\$	236,127.01

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01120899

Gross Claim	\$	280,616.30
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	280,616.30
YTD Amount:	\$	2,253,315.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00211074

Gross Claim	\$	52,842.23
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	52,842.23
YTD Amount:	\$	424,317.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.01334317

Gross Claim	\$	334,045.35
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	334,045.35
YTD Amount:	\$	2,682,345.29

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00370281

Gross Claim	\$	92,699.60
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	92,699.60
YTD Amount:	\$	744,366.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA 95901 5273

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00354045

Gross Claim	\$	88,634.92
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	88,634.92
YTD Amount:	\$	711,726.92

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00143779

Gross Claim	\$	35,994.97
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	35,994.97
YTD Amount:	\$	289,033.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

LONG BEACH CITY TREASURER

333 W OCEAN BL

LONG BEACH CA 90802

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00644648

Gross Claim	\$	161,387.19
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	161,387.19
YTD Amount:	\$	1,295,920.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100293A
PAYMENT ISSUE DATE: 3/27/2012

PASADENA CITY TREASURER

PO BOX 7115

PASADENA CA

91109 7215

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 2/16/2012 TO: 3/15/2012

Total amount collected:	\$192,526,015.15	Percentage of collection:	0.13003402
Gross monthly apportionment:	\$25,034,931.70	County/City Ratio:	0.00212607

Gross Claim	\$	53,226.02
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	53,226.02
YTD Amount:	\$	427,397.51